

Group Health Cooperative of Puget Sound

2003 Monthly Rates for Individual Market Plans New Plans Effective 4/1/2003

Plan Name	Area	Smoker/Non-Smoker	Age Band													
			Child	0-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65+ (N)	(A&B)	(A)	(B)
Comprehensive \$500 Deductible	Western	Smoker	\$129	\$154	\$154	\$178	\$200	\$212	\$250	\$283	\$343	\$415	\$415.00	\$160.44	\$462.12	\$356.04
		Non-Smoker	\$129	\$140	\$140	\$162	\$182	\$193	\$227	\$257	\$312	\$377	\$377.00	\$160.44	\$460.12	\$356.04
	Eastern	Smoker	\$142	\$171	\$171	\$196	\$222	\$233	\$273	\$311	\$378	\$457	\$457.00	\$194.85	\$532.00	\$532.00
		Non-Smoker	\$142	\$155	\$155	\$178	\$202	\$212	\$248	\$283	\$344	\$415	\$415.00	\$194.85	\$532.00	\$532.00
	Central	Smoker	\$158	\$187	\$187	\$217	\$245	\$259	\$304	\$344	\$418	\$505	\$505.00	\$194.85	\$556.70	\$545.14
		Non-Smoker	\$158	\$170	\$170	\$197	\$223	\$235	\$276	\$313	\$380	\$459	\$459.00	\$194.85	\$556.70	\$545.14
Comprehensive \$1,000 Deductible	Western	Smoker	\$122	\$145	\$145	\$167	\$188	\$199	\$233	\$265	\$323	\$389	\$389.00	\$160.44	\$457.00	\$356.04
		Non-Smoker	\$122	\$132	\$132	\$152	\$171	\$181	\$212	\$241	\$294	\$354	\$354.00	\$160.44	\$457.00	\$356.04
	Eastern	Smoker	\$135	\$161	\$161	\$184	\$208	\$221	\$257	\$294	\$355	\$429	\$429.00	\$194.85	\$506.00	\$506.00
		Non-Smoker	\$135	\$146	\$146	\$167	\$189	\$201	\$234	\$267	\$323	\$390	\$390.00	\$194.85	\$506.00	\$506.00
	Central	Smoker	\$149	\$177	\$177	\$202	\$230	\$244	\$284	\$325	\$394	\$475	\$475.00	\$194.85	\$556.70	\$545.14
		Non-Smoker	\$149	\$161	\$161	\$184	\$209	\$222	\$258	\$295	\$358	\$432	\$432.00	\$194.85	\$556.70	\$545.14
Catastrophic \$1,500 Deductible	Western	Smoker	\$66	\$68	\$70	\$78	\$85	\$99	\$110	\$129	\$157	\$200	\$237.00	\$107.46	\$232.00	\$232.00
		Non-Smoker	\$66	\$62	\$64	\$71	\$77	\$90	\$100	\$117	\$143	\$182	\$215.00	\$107.46	\$232.00	\$232.00
	Eastern	Smoker	\$72	\$76	\$77	\$87	\$95	\$110	\$120	\$143	\$173	\$221	\$260.00	\$165.23	\$258.00	\$258.00
		Non-Smoker	\$72	\$69	\$70	\$79	\$86	\$100	\$109	\$130	\$157	\$201	\$236.00	\$165.23	\$258.00	\$258.00
	Central	Smoker	\$80	\$84	\$85	\$96	\$102	\$120	\$133	\$157	\$193	\$245	\$288.00	\$165.23	\$285.00	\$285.00
		Non-Smoker	\$80	\$76	\$77	\$87	\$93	\$109	\$121	\$143	\$175	\$223	\$262.00	\$165.23	\$285.00	\$285.00
Catastrophic \$2,500 Deductible	Western	Smoker	\$56	\$58	\$59	\$67	\$73	\$83	\$94	\$109	\$130	\$166	\$196.00	\$107.46	\$198.00	\$198.00
		Non-Smoker	\$56	\$53	\$54	\$61	\$66	\$75	\$85	\$99	\$118	\$151	\$178.00	\$107.46	\$198.00	\$198.00
	Eastern	Smoker	\$62	\$63	\$66	\$74	\$80	\$91	\$102	\$120	\$143	\$184	\$216.00	\$165.23	\$213.00	\$213.00
		Non-Smoker	\$62	\$57	\$60	\$67	\$73	\$83	\$93	\$109	\$130	\$167	\$196.00	\$165.23	\$213.00	\$213.00
	Central	Smoker	\$68	\$70	\$73	\$81	\$89	\$102	\$113	\$132	\$160	\$202	\$239.00	\$165.23	\$240.00	\$240.00
		Non-Smoker	\$68	\$64	\$66	\$74	\$81	\$93	\$103	\$120	\$145	\$184	\$217.00	\$165.23	\$240.00	\$240.00
Catastrophic \$5,000 Deductible	Western	Smoker	\$46	\$48	\$48	\$55	\$60	\$68	\$77	\$89	\$107	\$136	\$161.00	\$107.46	\$165.00	\$165.00
		Non-Smoker	\$46	\$44	\$44	\$50	\$54	\$62	\$70	\$81	\$97	\$124	\$146.00	\$107.46	\$165.00	\$165.00
	Eastern	Smoker	\$53	\$53	\$56	\$62	\$68	\$78	\$87	\$101	\$121	\$156	\$182.00	\$165.23	\$180.00	\$180.00
		Non-Smoker	\$53	\$48	\$51	\$57	\$62	\$71	\$79	\$92	\$110	\$142	\$166.00	\$165.23	\$180.00	\$180.00
	Central	Smoker	\$57	\$61	\$62	\$69	\$76	\$87	\$96	\$112	\$135	\$172	\$202.00	\$165.23	\$206.00	\$206.00
		Non-Smoker	\$57	\$55	\$56	\$62	\$69	\$79	\$87	\$102	\$123	\$156	\$184.00	\$165.23	\$206.00	\$206.00

65+(N): 65 and over, not eligible for Medicare
(A&B): Plan members enrolled in Medicare Parts A and B
(A): Plan members enrolled in Medicare Part A
(B): Plan members enrolled in Medicare Part B